ication No. (if known): 10/028,624

Attorney Docket No.: 03310/023001

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MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

on	April 27, 2006
	Date

Delika V. L	Viesen
Signatur	e
Debra V. W	ieser
225 Typed or printed name of per	son signing Certificate
PATENT TRADEMARK OFFICE	(713) 228-8600
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Amendment Transmittal (1 page)
One Month Request for Extension of Time Under 37 CFR 1.136(a) (1

Fee Transmittal (1 page)

Payment by credit card. Form PTO-2038 is attached (1 page)

Charge \$120.00 to credit card

Amendment (5 pages)

Return Receipt Postcard (1 page)

Ich

AMENDMENT TRANSMITTAL LETTER O3310/f0/ Application No. Filing Date Examiner J. C. Norris Applicant(s): Yutaka Kaneda Invention: PROCESSES FOR MANUFACTURING MULTILAYER FLEXIBLE WIRING BOARD TO THE COMMISSIONER FOR PATENTS Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below. CLAIMS AS AMENDED Claims Remaining After Previously Present Rate Previously Present Rate	40		010	9-06		D-	ok okali
Application No. Filing Date December 20, 2001 J. C. Norris J. C. Norris	Of W AME	NDMENT 7	TRANSMI	TTAL LE	TTER		cket/No 10/0230
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TO THE COMMISSIONER FOR PATENTS Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below. CLAIMS AS AMENDED Claims Remaining After Previously Pald Previously Pald Present Rate Total Claims 1 - 20 =			December	20, 2001	J. C. Noms	<u> </u>	28
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Remaining After After Amendment Previously Extra Claims Rate		Claima		S AS AMEN	DED		
Independent Claims 1 - 3 = x Multiple Dependent Claims (check if applicable) Other fee (please specify): Extension for response within first month 120 TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 120 X Large Entity Small Entity No additional fee is required for this amendment. Please charge Deposit Account No. 50-0591 in the amount of \$ A check in the amount of \$ to cover the filling fee is enclosed. X Payment by credit card. Form PTO-2038 is attached. X The Director is hereby authorized to charge and credit Deposit Account No. 50-059 as described below. X Credit any overpayment.		Remaining After	Number Previously	Extra Claims	Rate		
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x Charge any additional filing or application processing fees required under 37 CFR 1.16 and				n processing f	fees required under 3	7 CFR 1.1	6 and 1
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T. Chyau Liang, Ph.D. Attorney/Agent Reg. No.: 48,885		1/2011				A: 1 0 7	

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H A A		U.S. Paten	Appro and Tradema	ved for use throug ark Office; U.S. DE	h 7/31/2006. C PARTMENT O	D/SB/17 (01-06) DMB 0651-0032 F COMMERCE
Under the Paperwork Reduction Act of		7				control number.
ees pursuant to the Consolidated Approp	riations Act, 2005 (H.R. 4818).			plete if Knov		
FEE TRANS		Application Nun		0/028,624-C		
		Filing Date		December 20	<u></u>	
For FY 20	106	First Named Inv	U	utaka Kaned	la	
		Examiner Name		. C. Norris		
Applicant claims small entity state	ıs. See 37 CFR 1.27	Art Unit		841		22511
OTAL AMOUNT OF PAYMENT	(\$) 120.00	Attorney Docket	No. 0	3310/02300	PATEN'	T TRADEMARK O
METHOD OF PAYMENT (check	all that apply)					
Check X Credit Card	Money Order No	one Other (please identi	fy):		
X Deposit Account Deposit Account I	lumber: 50-0591 Deposit Ac	ccount Name:		Osha · Liang	LLP	
For the above-identified depo	sit account, the Director i	is hereb <u>y a</u> uthorize	d to: (checl	k all that apply))	
Charge fee(s) indicated	below	Charg	e fee(s) indi	icated below, e	except for th	e filing fee
Charge any additional f	ee(s) or underpayment of 16 and 1.17	f x Credit	any overpa	yments		
EE CALCULATION (All the fe	es below are due upo	on filing or may	be subjec	t to a surch	arge.)	
BASIC FILING, SEARCH, AND EX	(AMINATION FEES					
FII		ARCH FEES	EXAMIN	ATION FEES	3	ŀ
pplication Type Fee (\$	Small Entity Fee (\$) Fee (\$	\$ Small Entity \$) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)
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Design 200	100 100		130	65		
Plant 200	100 300		160	80		
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EXCESS CLAIM FEES	100 0	U	U	V		Small Entity
e Description					Fee (\$)	Fee (\$)
ch claim over 20 (including Reiss	ies)				50	25
ch independent claim over 3 (inch	•				200	100
altiple dependent claims	,				360	180
otal Claims Extra Claims	Fee (\$) Fee	Paid (\$)	Mu	Itiple Depende	ent Claims	
1 -20=					Fee Paid (\$)	
P = highest numer of total claims paid for, i	f greater than 20.					
dep. Claims Extra Claims	Fee (\$) Fee	Paid (\$)				
1 - 3 = X						
APPLICATION SIZE FEE The specification and drawings ex listings under 37 CFR 1.52(e)), t sheets or fraction thereof. See 3 Total Sheets Extra Sheets	he application size fee do 5 U.S.C. 41(a)(1)(G) and	ue is \$250 (\$125 f	or small en	tity) for each a	idditional 50	'aid (\$)
- 100 =		_ (round up to a who	le number) x		=	
OTHER FEE(S) Non-English Specification \$130	fac (no small antitu din	acumt)			<u> Fees l</u>	Paid (\$)
Non-English Specification, \$130 Other (e.g., late filing surcharge):	` ,	,	st month		120	0.00
BMITTED BY						
	gas XX-1	Registration No.		1		
nature Son (1)	Man Mar	(Attorney/Agent)	48,885	Telephone	(713) 228	-8600 I

SUBMITTED BY					
Signature	- In Chyan X-7	Registration No. (Attorney/Agent)	48,885	Telephone	(713) 228-8600
Name (Print/Type)	T. Chyau Liang, Ph.D.			Date	April 27, 2006